

10/590439  
IAP9 Rec'd PCT/PTO 23 AUG 2006

APPLICATION DATA SHEET

**APPLICATION INFORMATION**

Application Number:: Unassigned  
Filing Date:: 08/23/2006  
Application Type:: Regular  
Subject Matter:: Utility  
Title:: INFORMATION MANAGEMENT SYSTEM  
AND METHOD  
Attorney Docket Number:: 214615.00018  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: Figure 1  
Total Drawing Sheets:: 35  
Small Entity?:: No

**APPLICANT INFORMATION**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full-Capacity  
Given Name:: Bradley C.  
Family Name:: HANSON  
City of Residence:: Harrisburg  
State or Province of Residence:: SD  
Country of Residence:: US  
Street of Mailing Address:: 27332 Ridgeway Road  
City of Mailing Address:: Harrisburg  
State or Province of Mailing Address:: SD  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 57032

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: GB  
Status:: Full-Capacity  
Given Name:: Christopher E.  
Family Name:: MURFIN  
City of Residence:: Sioux Falls  
State or Province of Residence:: SD  
Country of Residence:: US  
Street of Mailing Address:: 4809 S. Kyle Avenue  
City of Mailing Address:: Sioux Falls  
State or Province of Mailing Address:: SD  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 57103

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full-Capacity  
Given Name:: Staci L.  
Family Name:: UNRUH  
City of Residence:: Sioux Falls  
State or Province of Residence:: SD  
Country of Residence:: US  
Street of Mailing Address:: 4801 S. Kyle Avenue  
City of Mailing Address:: Sioux Falls  
State or Province of Mailing Address:: SD  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 57103

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full-Capacity  
Given Name:: Jeana M.  
Family Name:: SQUIER  
City of Residence:: Monroe  
State or Province of Residence:: SD  
Country of Residence:: US  
Street of Mailing Address:: 220 N St., E.  
City of Mailing Address:: Monroe  
State or Province of Mailing Address:: SD  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 57047

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full-Capacity  
Given Name:: Michael J.  
Family Name:: CONLIN  
City of Residence:: Minneapolis  
State or Province of Residence:: MN  
Country of Residence:: US  
Street of Mailing Address:: 4816 Drew Ave., S.  
City of Mailing Address:: Minneapolis  
State or Province of Mailing Address:: MN  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 55410

**CORRESPONDENCE INFORMATION**

Correspondence Customer Number:: 27160  
Telephone Number:: (202) 625-3547  
Fax Number:: (202) 298-7570  
E-Mail address:: [andrew.bateman@kattenlaw.com](mailto:andrew.bateman@kattenlaw.com)

**REPRESENTATIVE INFORMATION**

Representative Customer Number::	27160
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**DOMESTIC PRIORITY INFORMATION**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2006/011148	03/24/2006